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| | APPLICATION NUMBER | FILING/RECEIPT DATE | | FIRST NAMED APPLICANT | | ATTORNEY DOCKET NO JTITLE | | |
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| · | 09/449,801 | 11/26/99 | FORRES | Т | | S | 10644/5010 | |
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| | KENYON AND KE ONE BROADWAY | ENYON | | | N | OT ASS | SIGNED | |
| | NEW YORK NY 1 | 10004 | | | 2 | 872 | | |
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| | a de parte político de la comoción | NOTICE TO FIL | | | ATION | 9 | | |
| is give avoid a 37 CFI for a s | n TWO MONTHS FROM T abandonment. Extensions R 1:136(a). If any of items small entity in compliance | HE DATE OF THIS I of time may be obtain 1 or 3 through 5 are in with 37 CFR 1.27, | NOTICE with ined by filing indicated as | nin which to file all require a petition accompanied to missing, the SURCHAR | d items and p by the extens GE set forth | pay any fee sion fee und sin 37 CFR | es required below to der the provisions of 1.16(e) of [] \$65.00 | |
| □ sm | 09/449,801 11/26/99 FORREST S 10644/50101 0262/1222 KENYON AND KENYON ONE BROADWAY NEW YORK NY 10004 2872 DATE MAILED: | | | | | | | |
| • • | Applicant must submit \$ | CFR 1.27). | to comp | lete the basic filing fee a | nd/or file a | small entity | y statement | |
| P 2. | The following additional | claims fees are due: | : | | | | | |
| | \$ \(\frac{36}{}\) for_ | _ | al claims ove | er 20. | | : | | |
| • | \$for | ind | lependent cl | aims over 3. | | , | | |
| | Applicant must either s | ubmit the additional | claim surcha claim fees c | rge. or cancel additional clain | s for which | fees are d | ue. | |
| 1 3. € | is missing or unsigned does not cover the n | ed. ewlv submitted item | ıs. | | | | | |
| □ 4 . | the above Application No | umber and Filing Da | ite is require | ed. | | | | |
| | A properly signed oath of | | | 37 CFR 1.63, identifyin | g the applica | ation by the | e above | |
| □ 5 . | • • | • | | from the oath or declara | tion: | | | |
| | An oath or declaration in inventor(s), identifying the | n compliance with 37 nis application by the | 7 CFR 1.63 le e above App | listing the names of all in Dication Number and Fili | ventors and ng Date, is r | signed by equired. | the omitted | |
| | A \$50.00 processing fee | e is required since | your check | was returned without | payment (3 | | 21(m)). | |
| | ŭ , | | - | - | ayment. | | • | |

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

A copy of this notice <u>MUST</u> be returned with the reply.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless

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□ 9. OTHER:_